| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| DISTRICT OF NEVADA | | |
| Case number (if known) | Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ■ Chapter 13 | Check if this ar amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | | |
|-----|--|--|--|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | First name Middle name Cibrian Last name and Suffix (Sr., Jr., II, III) | Leslie First name K Middle name Cibrian Last name and Suffix (Sr., Jr., II, III) | |
| 2. | All other names you have used in the last 8 years Include your married or maiden names. | | Leslie K. Cibrian-Encinas | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-0839 | xxx-xx-1757 | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 2 of 62

Jesus Cibrian Debtor 1 Debtor 2 Leslie K Cibrian Case number (if known About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and \square I have not used any business name or EINs. **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. FDBA True Dreams, LLC used in the last 8 years La Rue Marche Cafe Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 5605 Morning Snow Court Las Vegas, NV 89141 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Clark County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Check one: Check one: Why you are choosing this district to file for bankruptcy Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, I I have lived in this district longer than in any have lived in this district longer than in any other

district.

I have another reason.

Explain. (See 28 U.S.C. § 1408.)

other district.

I have another reason.

Explain. (See 28 U.S.C. § 1408.)

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 3 of 62

| | otor 1 Jesus Cibrian Leslie K Cibrian | | | | Case number (if known) | |
|-----|---|---------------------------------|--|--|---|---------------------|
| Par | t 2: Tell the Court About | our Bankrupto | y Case | | | |
| 7. | The chapter of the Bankruptcy Code you are | Check one. (Fo (Form 2010)). | or a brief description Also, go to the top of | of each, see <i>Notice Required by</i> page 1 and check the appropriat | 11 U.S.C. § 342(b) for Individuals Filing for Bankrup e box. | ptcy |
| | choosing to file under | ☐ Chapter 7 | | | | |
| | | ☐ Chapter 11 | | | | |
| | | ☐ Chapter 12 | | | | |
| | | Chapter 13 | | | | |
| 8. | How you will pay the fee | about ho order. If | w you may pay. Typ | ically, if you are paying the fee yo | k with the clerk's office in your local court for more of burself, you may pay with cash, cashier's check, or alf, your attorney may pay with a credit card or check. | money |
| | | | | | on, sign and attach the Application for Individuals to |) Pay |
| | | ☐ I reques | t that my fee be wa | s (Official Form 103A). lived (You may request this optio your fee, and may do so only if yo | n only if you are filing for Chapter 7. By law, a judge ur income is less than 150% of the official poverty l | e may, line that |
| | | | | | n installments). If you choose this option, you must be cial Form 103B) and file it with your petition. | fill out |
| 9. | Have you filed for bankruptcy within the | ■ No. | | | | |
| | last 8 years? | ☐ Yes. | | | | |
| | | | | When | | |
| | | Dis | | When When | Case number | |
| | | DIS | rict | when | Case number | |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is | ■ No | | | | |
| | not filing this case with you, or by a business partner, or by an affiliate? | | | | | |
| | | Deb | otor | | Relationship to you | |
| | | Dis | rict | When | Case number, if known | |
| | | Deb | otor | | Relationship to you | |
| | | Dis | trict | When | Case number, if known | |
| 11. | Do you rent your | ■ No. Go | to line 12. | | | |
| | residence? | ☐ Yes. Ha | as your landlord obta | ained an eviction judgment agains | t you and do you want to stay in your residence? | |
| | | | No. Go to line | 12. | | |
| | | | | | Judgment Against You (Form 101A) and file it with t | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 4 of 62

| | otor 1 Jesus Cibrian Leslie K Cibrian | | | Case number (if known) | | | |
|-----|---|------------------------|---|---|--|--|--|
| Par | t 3: Report About Any Bu | sinesses ' | You Own as a Sole Proprie | tor | | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Part 4. | | | | |
| | business: | ☐ Yes. | Name and location of bus | siness | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if any | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Number, Street, City, Sta | te & ZIP Code | | | |
| | it to this petition. | | Check the appropriate bo | ox to describe your business: | | | |
| | | | ☐ Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) | | | |
| | | | ☐ Single Asset Rea | Estate (as defined in 11 U.S.C. § 101(51B)) | | | |
| | | | ☐ Stockbroker (as o | lefined in 11 U.S.C. § 101(53A)) | | | |
| | | | ☐ Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) | | | |
| | | | ☐ None of the above | е | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines operation | are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate ines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of tions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure U.S.C. 1116(1)(B). | | | | |
| | For a definition of small | No. | I am not filing under Chap | oter 11. | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter Code. | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | | |
| | | ☐ Yes. | I am filing under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | |
| Par | t 4: Report if You Own or | Have Any | Hazardous Property or An | y Property That Needs Immediate Attention | | | |
| 14. | Do you own or have any | ■ No. | | | | | |
| | property that poses or is alleged to pose a threat of imminent and | ☐ Yes. | What is the hazard? | | | | |
| | identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? | | If immediate attention is needed, why is it needed? | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is the property? | | | | |
| | | | | Number, Street, City, State & Zip Code | | | |
| | | | | | | | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 5 of 62 Debtor 1 Jesus Cibrian Debtor 2 Leslie K Cibrian Case number (if known) Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed briefing about credit counseling agency within the 180 days before I counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. completion. The law requires that you Attach a copy of the certificate and the payment plan, if Attach a copy of the certificate and the payment receive a briefing about plan, if any, that you developed with the agency. any, that you developed with the agency. credit counseling before you file for bankruptcy. I received a briefing from an approved credit I received a briefing from an approved credit You must truthfully check counseling agency within the 180 days before I filed counseling agency within the 180 days before I one of the following filed this bankruptcy petition, but I do not have this bankruptcy petition, but I do not have a certificate choices. If you cannot do a certificate of completion. of completion. so, you are not eligible to file. Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling ☐ I certify that I asked for credit counseling services you paid, and your services from an approved agency, but was from an approved agency, but was unable to obtain creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. request, and exigent circumstances merit a 30-day days after I made my request, and exigent circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you Your case may be dismissed if the court is filed for bankruptcy. dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must If the court is satisfied with your reasons, you must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed. agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case Any extension of the 30-day deadline is granted only for may be dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of: Incapacity. Incapacity. I have a mental illness or a mental deficiency I have a mental illness or a mental deficiency that that makes me incapable of realizing or makes me incapable of realizing or making rational making rational decisions about finances. decisions about finances. Disability. Disability. My physical disability causes me to be My physical disability causes me to be unable to unable to participate in a briefing in person, participate in a briefing in person, by phone, or by phone, or through the internet, even after I through the internet, even after I reasonably tried to reasonably tried to do so. do so.

Active duty.

combat zone.

of credit counseling with the court.

I am currently on active military duty in a military

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver

Active duty.

military combat zone.

I am currently on active military duty in a

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver credit counseling with the court.

П

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 6 of 62

| | tor 1 Jesus Cibrian tor 2 Leslie K Cibrian | | | Case nu | mber (if known) | | | |
|------|---|--|--|--|--|--|--|--|
| Part | 6: Answer These Quest | ions for R | eporting Purposes | | | | | |
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." | | | | | |
| | | | □ No. Go to line 16b. | | | | | |
| | | | Yes. Go to line 17. | | | | | |
| | | 16b. | | Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | |
| | | | ☐ No. Go to line 16c. | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | |
| | | 16c. | State the type of debts you owe th | at are not consumer debts or bus | iness debts | | | |
| 17. | Are you filing under Chapter 7? | ■ No. I am not filing under Chapter 7. Go to line 18. | | | | | | |
| | Do you estimate that after any exempt property is excluded and | ☐ Yes. | I am filing under Chapter 7. Do you are paid that funds will be available | | property is excluded and administrative expenses tors? | | | |
| | administrative expenses are paid that funds will | | □ No | | | | | |
| | be available for distribution to unsecured creditors? | | Yes | | | | | |
| 18. | How many Creditors do | □ 1-49 | | □ 1,000-5,000 | 2 5,001-50,000 | | | |
| | you estimate that you owe? | 50-99 |) | ☐ 5001-10,000 | ☐ 50,001-100,000 | | | |
| | | ☐ 100-1 ☐ 200-9 | | ☐ 10,001-25,000 | ☐ More than100,000 | | | |
| 19. | How much do you | □ \$0 - \$ | | □ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion | | | |
| | estimate your assets to be worth? | | 01 - \$100,000 | □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million | ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion | | | |
| | | | 001 - \$500,000 001 - \$1 million | □ \$100,000,001 - \$100 million | | | | |
| 20. | How much do you | □ \$0 - \$ | | □ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion | | | |
| | estimate your liabilities to be? | | 001 - \$100,000 | □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million | \$1,000,000,001 - \$10 billion | | | |
| | | _ | 001 - \$500,000 001 - \$1 million | □ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | | | |
| Part | 7: Sign Below | | | | | | | |
| For | you | I have ex | ramined this petition, and I declare u | under penalty of perjury that the ir | nformation provided is true and correct. | | | |
| | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 1 United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. | | | | | | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | | |
| | | I request | relief in accordance with the chapte | er of title 11, United States Code, | specified in this petition. | | | |
| | | | cy case can result in fines up to \$25 | | ney or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, | | | |
| | | | is Cibrian | /s/ Leslie K C | | | | |
| | | Jesus (Signature | e of Debtor 1 | Leslie K Cib i Signature of De | | | | |
| | | Executed | d on April 30, 2016 | Executed on | April 30, 2016 | | | |
| | | _,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | MM / DD / YYYY | | MM / DD / YYYY | | | |
| | | | | | | | | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 7 of 62

| Debtor 1 Debtor 2 Jesus Cibrian Leslie K Cibrian | | Cas | e number (if known) |
|---|---|--|---|
| For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page. | I, the attorney for the debtor(s) named in this petition under Chapter 7, 11, 12, or 13 of title 11, United Sta for which the person is eligible. I also certify that I h and, in a case in which § 707(b)(4)(D) applies, certify schedules filed with the petition is incorrect. | tes Code, and have e ave delivered to the o | explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b) |
| to me and page. | /s/ Lawrence D. Rouse, Esq. | Date | April 30, 2016 |
| | Signature of Attorney for Debtor | | MM / DD / YYYY |
| | Lawrence D. Rouse, Esq. Printed name Lawrence D Rouse, LTD. Firm name 523 S Eighth St Las Vegas, NV 89101 Number, Street, City, State & ZIP Code | | |
| | Contact phone 702-387-1800 | Email address | rouselaw@aol.com |

Bar number & State

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form

http://www.uscourts.gov/bkforms/bankruptcy_fcs.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 12 of 62

| Fill | in this inforn | nation to identify your | case: | | | |
|----------------|---|---|---|--|-------------|--|
| Deb | tor 1 | Jesus Cibrian | Middle Nieses | LackName | | |
| Deh | tor 2 | First Name Leslie K Cibrian | Middle Name | Last Name | | |
| | use if, filing) | First Name | Middle Name | Last Name | | |
| Unit | ed States Bai | nkruptcy Court for the: | DISTRICT OF NEVADA | | | |
| 010 | ou oluloo bul | mapley Court for the. | | | | |
| Cas (if knd | e number _ | | | | □ Chec | ck if this is an |
| (| ····· | | | | _ | nded filing |
| Sul Be a | mmary o s complete a mation. Fill o | and accurate as possib out all of your schedul | ole. If two married people a es first; then complete the | d Certain Statistical Information are filing together, both are equally responsible for information on this form. If you are filing amend the box at the top of this page. | | |
| Part | 1: Summ | arize Your Assets | | | | |
| | | | | | Vour | assets |
| | | | | | | of what you own |
| 1. | Schedule A | /B: Property (Official Fe | orm 106A/B) | | | _ |
| •• | | | | | \$ | 457,991.00 |
| | 1b. Copy line | e 62, Total personal pro | perty, from Schedule A/B | | \$ | 33,439.00 |
| | 1c. Copy line | e 63, Total of all propert | y on Schedule A/B | | \$ | 491,430.00 |
| | | | • | | · <u></u> | - , |
| Part | 2: Summ | arize Your Liabilities | | | | |
| | | | | | | iabilities |
| | | | | | Amou | nt you owe |
| 2. | | | <i>laims Secured by Property</i> (mn A, <i>Amount of claim,</i> at th | Official Form 106D) ne bottom of the last page of Part 1 of Schedule D | \$ | 350,705.00 |
| 3. | | | Unsecured Claims (Official I | | • | 2 000 00 |
| | 3a. Copy th | e total claims from Part | 1 (priority unsecured claims |) from line 6e of Schedule E/F | \$ | 3,000.00 |
| | 3b. Copy th | e total claims from Part | 2 (nonpriority unsecured cla | ims) from line 6j of Schedule E/F | \$ | 184,168.56 |
| | | | | | | |
| | | | | Your total liabilities | \$ | 537,873.56 |
| | | | | | | <u>, </u> |
| Part | 3: Summ | arize Your Income and | l Expenses | | | |
| 4 | | | | | - | |
| 4. | | Your Income (Official Foombined monthly incom | | | \$ | 5,863.00 |
| 5. | Schodulo I: | Your Expenses (Official | Form 106 | | | |
| 5. | | | | | \$ | 5,261.00 |
| Part | 4 Answe | er These Questions for | Administrative and Statis | tical Records | | |
| | | | | Nour Resource | | |
| 6. | - | | er Chapters 7, 11, or 13? on this part of the form. Ch | eck this box and submit this form to the court with yo | ur other so | chedules. |
| | Yes | | | | | |
| 7. | | of debt do you have? | | | | |
| | ■ Vour d | ahte ara primarily ass | sumar dahte Canaumas d | ohte are those "incurred by an individual seimonity for | a person- | l family or |
| | | | | ebts are those "incurred by an individual primarily for for statistical purposes. 28 U.S.C. § 159. | a persona | ı, ıamıy, or |
| | □ Your d | ebts are not primarily | consumer debts. You have | e nothing to report on this part of the form. Check this | s box and s | submit this form to |

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

the court with your other schedules.

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 13 of 62

| Debtoi | ^{r 2} Leslie K Cibrian | Case number (if known) | |
|-------------|--|---|---|
| | | | |
| 8. F | rom the Statement of Your Current Monthly Income: Co | nov your total current monthly income from Official For | m |

 From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

10,333.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Tota | l claim |
|--|------|---------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

Debtor 1

Jesus Cibrian

| | Case 10-124 | 5U-IIIKII | DUC | T FIII6 | reu 04/30/10 15.39 | .50 Pa | age 14 01 | 02 | • |
|---------------------------------|---------------------------------------|---|---|---------------------|---|---------------------------|--------------------------|-------|------------------------------------|
| Fill in this info | rmation to identify you | r case and th | nis filing | j: | | | | | |
| Debtor 1 | Jesus Cibrian | | | | | | | | |
| | First Name | | Name | | Last Name | | | | |
| Debtor 2 (Spouse, if filing) | Leslie K Cibrian | | Name | | Last Name | | | | |
| | | | | /ADA | Last Name | | | | |
| United States B | Sankruptcy Court for the: | DISTRICT | OF INE | ADA | | | | | |
| Case number | | | | | _ | | | | Check if this is ar amended filing |
| _ | orm 106A/B | w4. r | | | | | | | |
| <u>Scneau</u> | <u>le A/B: Pro</u> | perty | | | | | | | 12/15 |
| Answer every que | • | · | | | he top of any additional pages wn or Have an Interest In | , write your i | ianic and case | , mui | ilber (ii kilowii). |
| ☐ No. Go to Pa Yes. Where | art 2. | | | | | | | | |
| 1.1 5605 Mor | rning Snow Court | | What | | ty? Check all that apply | | | | |
| | s, if available, or other description | n | Single-family home Duplex or multi-unit building Condominium or cooperative | | Do not deduct secured claims or the amount of any secured claims Creditors Who Have Claims Secu | | ns on <i>Schedule D:</i> | | |
| | | | | Manufacture | d or mobile home | Commandor | lua af tha | ٥ | want value of the |
| Las Vega | as NV 89 | 141-0000 | | Land | | Current va entire prop | | | rrent value of the rtion you own? |
| City | State | ZIP Code | | Investment p | property | \$4 | 57,991.00 | _ | \$457,991.00 |
| | | ☐ Timeshare ☐ Other Who has an interest in the property? Check one | | | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. | | | | |
| | | | | Debtor 1 only | y | 1st trust | deed | | |
| Clark | | | | Debtor 2 only | y | | | | |
| County | | | | | Debtor 2 only | Check | c if this is com | mun | ity property |
| | | | 011 | | of the debtors and another | , | structions) | | |
| | | | | erty identification | you wish to add about this iter tion number: | n, such as ic | ocai | | |
| | | | | | | | | | |
| | | | | | from Part 1, including any | | | | \$457,991.00 |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 15 of 62

| Debto | | lesus Cibrian ₋eslie K Cibrian | | Case number (if known) | |
|--------------|----------------------|---|--|-----------------------------|--|
| 3. Ca | rs, vans | , trucks, tractors, sport utility ve | ehicles, motorcycles | _ | |
| □ r | | | | | |
| 3.1 | | Honda Fit 2008 mate mileage: 140000 formation: | Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | the amount of any se | portion you own? |
| | | Ford Mustang 2010 mate mileage: 90000 formation: | Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | the amount of any se | ed claims or exemptions. Put ecured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? |
| | | | ■ Check if this is community property | \$7,300.0 | \$7,300.00 |
| | ld the d | | vn for all of your entries from Part 2, including that number here | | \$9,988.00 |
| .pa | | | | | |
| Part 3 | | ibe Your Personal and Household It or have any legal or equitable in | ems terest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Ex | <i>amples:</i> No | I goods and furnishings Major appliances, furniture, linens | s, china, kitchenware | | dame of oxomptone. |
| | 103. D | Household furn | niture | | \$4,000.00 |
| Ex | No | | eo, stereo, and digital equipment; computers, prin nedia players, games | nters, scanners; music coll | ections; electronic devices |
| | | Various TV's, s | tereos, cell phones, computers | | \$400.00 |
| | | | · · · · | | |

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

Official Form 106A/B Schedule A/B: Property page 2

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 16 of 62

| Debtor 1 Jesus Cibrian Debtor 2 Leslie K Cibrian Case number (if known) | |
|--|---|
| ☐ Yes. Describe | |
| 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and k musical instruments ■ No □ Yes. Describe | kayaks; carpentry tools; |
| 10. Firearms | |
| Examples: Pistols, rifles, shotguns, ammunition, and related equipment■ No□ Yes. Describe | |
| 11. Clothes | |
| wearing apparel | \$400.00 |
| 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, and long levelry. □ No ■ Yes. Describe | silver |
| Wedding rings, various jewelry | \$1,500.00 |
| 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No ■ Yes. Describe | |
| dog | \$1.00 |
| 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No □ Yes. Give specific information 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here | \$6,301.00 |
| Do you own or have any legal or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes | |
| Cash | \$50.00 |
| Cash | \$17,000.00 |

Official Form 106A/B Schedule A/B: Property page 3

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 17 of 62

| | ebtor 1 ebtor 2 | Jesus Cibr Leslie K Ci | | | | Case number (if known) | | | |
|-----|--|---------------------------|--|---|--|---|--|--|--|
| 17. | 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. | | | | | | | | |
| | □ No ■ Yes | | | | Institution name: | | | | |
| | | | 17.1. | Checking | Wells Fargo | \$50.00 | | | |
| | | | 17.2. | PMA Savings Account | Wells Fargo | \$50.00 | | | |
| 18. | Example No | | | cly traded stocks ent accounts with brokera | nge firms, money market accounts | | | | |
| 19. | Non-pu joint ve ■ No | | stock and | interests in incorporate | ed and unincorporated businesses | , including an interest in an LLC, partnership, and | | | |
| | ☐ Yes. | Give specific i | | about them me of entity: | | % of ownership: | | | |
| 20. | Negotia Non-ne ■ No | able instrumen | ts include purpose to include pu | personal checks, cashiers those you cannot transfe | le and non-negotiable instruments s' checks, promissory notes, and mor r to someone by signing or delivering | ney orders. | | | |
| 21. | Exampa ■ No | | n IRA, ERIS | SA, Keogh, 401(k), 403(b |), thrift savings accounts, or other pe | nsion or profit-sharing plans | | | |
| | ☐ Yes. L | List each acco | | ely. of account: | Institution name: | | | | |
| 22. | Your sh Examp | les: Agreemen | sed deposit | s you have made so that | you may continue service or use from cutilities (electric, gas, water), teleco | m a company ommunications companies, or others | | | |
| 00 | | | f | d' | Institution name or individual: | | | | |
| 23. | ■ No □ Yes | ` | · | e and description. | you, either for life or for a number of | years) | | | |
| 24. | | | | n an account in a qualif and 529(b)(1). | ied ABLE program, or under a qua | lified state tuition program. | | | |
| | ☐ Yes | | Institution r | name and description. Se | parately file the records of any intere | sts.11 U.S.C. § 521(c): | | | |
| 25. | Trusts, ■ No | equitable or f | uture inte | rests in property (other | than anything listed in line 1), and | rights or powers exercisable for your benefit | | | |
| | | Give specific i | nformation | about them | | | | | |
| 26. | | | | | her intellectual property om royalties and licensing agreemen | ts | | | |

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Give specific information about them...

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 18 of 62

| | ebtor 1 ebtor 2 | Jesus Cibrian Leslie K Cibrian | | Case number (if known) | |
|-----|------------------------------|--|---|--|---|
| | Example ■ No | s, franchises, and other general es: Building permits, exclusive licer | nses, cooperative association holdings, | , liquor licenses, professional licenses | |
| M | oney or p | roperty owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ■ No | nds owed to you ive specific information about them | n, including whether you already filed th | ne returns and the tax years | |
| | ■ No | | spousal support, child support, mainte | nance, divorce settlement, property se | ettlement |
| | Example No | nounts someone owes you es: Unpaid wages, disability insurar benefits; unpaid loans you mad Bive specific information | nce payments, disability benefits, sick ple to someone else | pay, vacation pay, workers' compens | ation, Social Security |
| 31. | Interests Example ■ No | s in insurance policies | | dit, homeowner's, or renter's insurance Beneficiary: | Surrender or refund value: |
| | If you ar someon No | rest in property that is due you fee the beneficiary of a living trust, ee has died. Sive specific information | from someone who has died expect proceeds from a life insurance po | olicy, or are currently entitled to receiv | |
| | Example ■ No | | not you have filed a lawsuit or made s, insurance claims, or rights to sue | a demand for payment | |
| | ■ No | ontingent and unliquidated claim Describe each claim | s of every nature, including counter | claims of the debtor and rights to s | et off claims |
| | ■ No | ncial assets you did not already Give specific information | list | | |
| 36 | | - | es from Part 4, including any entries | | \$17,150.00 |
| Pa | rt 5: Desc | cribe Any Business-Related Property | You Own or Have an Interest In. List any | real estate in Part 1. | |
| ١ | Do you ov No. Go t Yes. Go | o Part 6. | rest in any business-related property? | | |

Official Form 106A/B Schedule A/B: Property page 5

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 19 of 62

| Debtor Debtor | | | Case number (if known) | |
|------------------|--|------------------------|------------------------------|--------------|
| Part 6: | Describe Any Farm- and Commercial Fishing-Related Property You Of If you own or have an interest in farmland, list it in Part 1. | Own or Have an Interes | st In. | |
| 46. Do | you own or have any legal or equitable interest in any farm- | or commercial fishir | ng-related property? | |
| | No. Go to Part 7. | | | |
| | Yes. Go to line 47. | | | |
| Part 7: | Describe All Property You Own or Have an Interest in That You | Did Not List Above | | |
| | you have other property of any kind you did not already list? kamples: Season tickets, country club membership | | | |
| | | | | |
| | es. Give specific information | | | |
| | dd the dollar value of all of your entries from Part 7. Write that | t number here | | \$0.00 |
| Part 8: | List the Totals of Each Part of this Form | | | |
| 55. P | art 1: Total real estate, line 2 | | | \$457,991.00 |
| 56. P | art 2: Total vehicles, line 5 | \$9,988.00 | | |
| 57. P | art 3: Total personal and household items, line 15 | \$6,301.00 | | |
| 58. P | art 4: Total financial assets, line 36 | \$17,150.00 | | |
| 59. P | art 5: Total business-related property, line 45 | \$0.00 | | |
| 60. P | art 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. P | art 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. T | otal personal property. Add lines 56 through 61 | \$33,439.00 | Copy personal property total | \$33,439.00 |
| 63 T | otal of all property on Schedule A/B. Add line 55 + line 62 | | | \$491 430 00 |

Official Form 106A/B Schedule A/B: Property page 6

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 20 of 62

| Fill in this infor | | | | |
|---------------------|--------------------------|--------------------|-----------|--------------------------------------|
| Debtor 1 | Jesus Cibrian | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Leslie K Cibrian | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF NEVADA | | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | · · · · · · · · · · · · · · · · · · · | | Specific laws that allow exemption | |
|--|--------------------------------------|---------------------------------------|---|------------------------------------|--|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| 5605 Morning Snow Court Las Vegas, NV 89141 Clark County | \$457,991.00 | \$108,231.00 | | Nev. Rev. Stat. §§ 21.090(1)(I | |
| Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 2008 Honda Fit 140000 miles | \$2,688.00 | | \$2,688.00 | Nev. Rev. Stat. § 21.090(1)(f) | |
| Elle Holli Schedule PAD. 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 2010 Ford Mustang 90000 miles | \$7,300.00 | | \$7,300.00 | Nev. Rev. Stat. § 21.090(1)(f) | |
| Ellie Hoff Gorleddie 742. G.E | | | 100% of fair market value, up to any applicable statutory limit | | |
| Household furniture Line from Schedule A/B: 6.1 | \$4,000.00 | | \$4,000.00 | Nev. Rev. Stat. § 21.090(1)(b) | |
| Ellie Hoff Gorleddie 742. G.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| wearing apparel | \$400.00 | | \$400.00 | Nev. Rev. Stat. § 21.090(1)(b) | |
| Line nom <i>Schedule A/D</i> . 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 21 of 62

| scription of the property and line on le A/B that lists this property | Current value of the | Δ | | |
|---|--|---|---|---|
| | portion you own | Amount of the exemption you claim | | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | \$1,500.00 | | \$1,500.00 | Nev. Rev. Stat. § 21.090(1)(a) |
| in deficable AVE. 12.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| m Schedule A/B: 13.1 | \$1.00 | | \$1.00 | Nev. Rev. Stat. § 21.090(1)(z) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| m Schadula A/R: 16 1 | \$50.00 | | \$37.50 | Nev. Rev. Stat. § 21.090(1)(g) |
| III Schedule A/D. 19.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| m Cahadida A/D: 16 1 | \$50.00 | | \$12.50 | Nev. Rev. Stat. § 21.090(1)(z) |
| m Scriedule A/B: 10.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| m Schodulo A/P: 16 2 | \$17,000.00 | | \$12,750.00 | Nev. Rev. Stat. § 21.090(1)(g) |
| III Scriedule A/D. 10.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| m Schadula A/R: 16 2 | \$17,000.00 | | \$1,961.50 | Nev. Rev. Stat. § 21.090(1)(z) |
| in Garcadie 7/B. 16.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | \$50.00 | | \$37.50 | Nev. Rev. Stat. § 21.090(1)(g) |
| m concadio /vB. TTT | | | 100% of fair market value, up to any applicable statutory limit | |
| _ | \$50.00 | | \$12.50 | Nev. Rev. Stat. § 21.090(1)(z) |
| in Garcadic Add. TT.T | | | 100% of fair market value, up to any applicable statutory limit | |
| | \$50.00 | | \$37.50 | Nev. Rev. Stat. § 21.090(1)(g) |
| III Schedule A/D. 11-2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | \$50.00 | | \$12.50 | Nev. Rev. Stat. § 21.090(1)(z) |
| Conocido / v D. TTIE | | | 100% of fair market value, up to any applicable statutory limit | |
| | ing rings, various jewelry om Schedule A/B: 12.1 om Schedule A/B: 13.1 om Schedule A/B: 16.1 om Schedule A/B: 16.2 om Schedule A/B: 16.2 cting: Wells Fargo om Schedule A/B: 17.1 cting: Wells Fargo om Schedule A/B: 17.1 Savings Account: Wells Fargo om Schedule A/B: 17.2 Savings Account: Wells Fargo om Schedule A/B: 17.2 | ### Schedule A/B: 13.1 ### \$1.00 ### \$50.00 | ### Schedule A/B: 12.1 \$1.00 | mm Schedule A/B: 12.1 \$1.00 \$1.00 \$1.00 \$1.00 \$1.00 \$1.00 \$1.00 \$1.00 \$1.00 \$1.00 \$1.00 \$3.7.50 \$2.50 \$3.7.50 |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 22 of 62

| Fill in this information to identify you | ur case: | | | |
|--|--|--------------------------|--|---------------|
| Debtor 1 Jesus Cibrian | | | | |
| First Name | Middle Name Last Name | | | |
| Debtor 2 Leslie K Cibria | 1 | | | |
| (Spouse if, filing) First Name | Middle Name Last Name | | | |
| United States Bankruptcy Court for the | : DISTRICT OF NEVADA | | | |
| Ciniou Ciaios Daimagris, Court of and | | | | |
| Case number | | | | |
| (if known) | | | _ | if this is an |
| | | | ameno | led filing |
| Official Form 106D | | | | |
| | | | | |
| Schedule D: Creditors | S Who Have Claims Secure | d by Property | <u>y </u> | 12/15 |
| | If two married people are filing together, both are e out, number the entries, and attach it to this form. | | | |
| 1. Do any creditors have claims secured b | y your property? | | | |
| ☐ No. Check this box and submit | his form to the court with your other schedules. | You have nothing else to | o report on this form. | |
| _ | • | . ou navo noum g oloo t | | |
| Yes. Fill in all of the information | below. | | | |
| Part 1: List All Secured Claims | | . Column A | Column B | Column C |
| | more than one secured claim, list the creditor separatels a particular claim, list the other creditors in Part 2. As | y Amount of claim | Value of collateral | Unsecured |
| much as possible, list the claims in alphabet | • | Do not deduct the | that supports this | portion |
| Novedo State Dept 4et | | value of collateral. | claim | If any |
| Nevada State Bank 1st | Describe the property that secures the claim: | \$177,946.00 | \$457,991.00 | \$0.00 |
| Creditor's Name | 5605 Morning Snow Court Las | | | · · · |
| | Vegas, NV 89141 Clark County | | | |
| | | | | |
| 2185 S. 3270 W | As of the date you file, the claim is: Check all that apply. | | | |
| Salt Lake City, UT 84119 | ☐ Contingent | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | |
| Who are the debte of | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| ☐ Debtor 1 only ☐ Debtor 2 only | An agreement you made (such as mortgage or second car loan) | ecured | | |
| _ | Statutory lien (such as tax lien, mechanic's lien) | | | |
| ■ Debtor 1 and Debtor 2 only□ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| _ | ☐ Other (including a right to offset) | | | |
| Check if this claim relates to a community debt | — Other (including a right to onset) | | | |
| , | | | | |
| Date debt was incurred 12/2004 | Last 4 digits of account number 6521 | | | |
| | | | | |
| 2.2 Olympia Management | Describe the manufacture to the definition | \$0.00 | \$0.00 | \$0.00 |
| Creditor's Name | Describe the property that secures the claim: | Ψ0.00 | Ψ0.00 | Ψ0.00 |
| | HOA Fees on Real Property located at 5605 Morning Snow Court | | | |
| 11411 Southern | Las Vegas, NV 89141 | | | |
| Highlands Parkway Suite 100 | As of the date you file, the claim is: Check all that | | | |
| Las Vegas, NV 89141 | apply. ☐ Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| , , , , | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| ☐ Debtor 1 only | ■ An agreement you made (such as mortgage or se | ecured | | |
| Debtor 2 only | car loan) | | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| lacksquare At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| Check if this claim relates to a community debt | Other (including a right to offset) | | | |

Official Form 106D

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 23 of 62

| Debtor 1 | Jesus Cibrian | | | Ca | ase number (_{if know}) | | |
|------------|---|-----------------|--|---|-----------------------------------|--------------|--------|
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | Leslie K Cibrian First Name | Middle Name | Last Name | | | | |
| | i iist ivaiiie | Wildule Ivaille | Lastivalle | | | | |
| Date deb | t was incurred | | Last 4 digits of account number | 5107 | | | |
| | outhern Highlands | | | | | | |
| | mmunity Assoc. H | IOA De | scribe the property that secures the c | laim: | \$0.00 | \$0.00 | \$0.00 |
| | ditor's Name | | OA Lien on Real Property loca | ated | | | |
| | | at | | | | | |
| | | | 606 Morning Snow Court, Las egas, NV 89141 | | | | |
| | 411 Southern | | of the date you file, the claim is: Chec | k all that | | | |
| | ghlands Pkwy #100 IY 12931-7000 | ар, | | | | | |
| - | mber, Street, City, State & Zip | | Contingent Unliquidated | | | | |
| 1401 | niser, etreet, etty, etate a zip | | Disputed | | | | |
| Who ow | es the debt? Check one | | ture of lien. Check all that apply. | | | | |
| ☐ Debto | r 1 only | | An agreement you made (such as morto | gage or secur | red | | |
| ☐ Debto | r 2 only | _ | car loan) | | | | |
| | r 1 and Debtor 2 only | | Statutory lien (such as tax lien, mechan | ic's lien) | | | |
| At lea | st one of the debtors and | | Judgment lien from a lawsuit | | | | |
| | k if this claim relates to | a ⊔ | Other (including a right to offset) | | | | |
| Comi | munity debt | | | | | | |
| Date deb | t was incurred 2015- | 2016 | Last 4 digits of account number | ourt | | | |
| □ w | ells Fargo Bank NA | /Na | | | | | |
| | d Trust deed | | scribe the property that secures the c | laim: | \$107,184.00 | \$457,991.00 | \$0.00 |
| Cre | ditor's Name | | 05 Morning Snow Court Las | | | | |
| 5.0 | A C 000E 00E | Ve | egas, NV 89141 Clark County | | | | |
| | AC 8235-02F D Box 10438 | | of the date you file, the claim is: Chec | k all that | | | |
| _ | es Moines, IA 50306 | арр Б | Oly. Contingent | | | | |
| Nur | mber, Street, City, State & Zip | | Unliquidated | | | | |
| | | | Disputed | | | | |
| Who ow | es the debt? Check one | . Na | ture of lien. Check all that apply. | | | | |
| ☐ Debto | • | | An agreement you made (such as morto | gage or secur | ed | | |
| Debto | | п | car loan) | iola lian) | | | |
| _ | or 1 and Debtor 2 only | | Statutory lien (such as tax lien, mechan | ics lien) | | | |
| _ | st one of the debtors and | | Judgment lien from a lawsuit Other (including a right to offset) | | | | |
| | k if this claim relates to a munity debt | а 🗕 | | | | | |
| | t was incurred 2006 | | Last 4 digits of account number | 1998 | | | |
| - Date deb | 2000 | | Last 4 digits of account number | 1330 | | | |
| | ells Fargo Bank NA d Trust deed | | scribe the property that secures the c | laim: | \$65,575.00 | \$457,991.00 | \$0.00 |
| | ditor's Name | | 605 Morning Snow Court Las | 1 - | | | |
| | | | egas, NV 89141 Clark County | | | | |
| | AC 8235-02F | As | of the date you file, the claim is: Chec | k all that | | | |
| | D Box 10438 es Moines, IA 50306 | app | | | | | |
| | mber, Street, City, State & Zip | | Contingent | | | | |
| inur | inser, Street, Oily, State & ZIP | | Unliquidated Disputed | | | | |
| Who ow | es the debt? Check one | | ture of lien. Check all that apply. | | | | |
| ☐ Debto | r 1 only | | An agreement you made (such as morto | gage or secur | red | | |
| ☐ Debto | r 2 only | | car loan) | , | | | |
| Debto | or 1 and Debtor 2 only | | Statutory lien (such as tax lien, mechan | ic's lien) | | | |
| ☐ At leas | st one of the debtors and | another \Box | Judgment lien from a lawsuit | | | | |

Official Form 106D Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 24 of 62

| Debtor 1 | Jesus Cibrian | | | Case number (if know) | |
|--|--|------------------------|---------------------------------|-----------------------|---|
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Leslie K Cibrian | | | | |
| | First Name | Middle Name | Last Name | | |
| | if this claim relates to a unity debt | a Other (in | cluding a right to offset) | | |
| Date debt | was incurred 2008 | Last | 4 digits of account number | 2126 | |
| | | | | | |
| Add the | dollar value of your en | tries in Column A on t | his page. Write that number her | re: \$350,705.00 | |
| If this is the last page of your form, add the dollar value totals from all pages. Write that number here: | | | ue totals from all pages. | \$350,705.00 | 1 |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 25 of 62

| | | Od30 10 12-100 | min Do | , | iterea 0-1/ | 00/10 | 10.00.00 | | 01 02 | |
|------------------------------|--|--|--|---|---|------------------------------|---|-----------------------------|----------------------------|-------------------------------|
| Fill | in this inform | nation to identify your c | ase: | | | | | | | |
| Del | btor 1 | Jesus Cibrian | | | | | | | | |
| | | First Name | Middle Nam | е | Last Nam | 9 | | | | |
| 1 | btor 2 | Leslie K Cibrian | Middle Nove | | Last Nass | | | | | |
| (Spc | ouse if, filing) | First Name | Middle Nam | е | Last Nam | 9 | | | | |
| Uni | ited States Bar | nkruptcy Court for the: | DISTRICT OF | NEVADA | | | | | | |
| Cas | se number | | | | | | | | | |
| (if kr | nown) | | | | | | | | - | if this is an ed filing |
| | ficial Form | | | | | | | | | |
| Sc | hedule E | /F: Creditors WI | no Have l | Insecur | ed Claim | <u> </u> | | | | 12/15 |
| Sche Sche left. nam | edule G: Execut edule D: Credito Attach the Cont e and case num | racts or unexpired leases tory Contracts and Unexpirors Who Have Claims Secutinuation Page to this page ober (if known). I of Your PRIORITY Uns | red Leases (Office red by Property F. If you have no | cial Form 1060 If more space information to | G). Do not inclu e is needed, co | ide any cre py the Par | editors with partially t you need, fill it out | secured cla , number the | ims that a e entries in | re listed in the boxes on the |
| 1. | | rs have priority unsecured | claims against | you? | | | | | | |
| | ☐ No. Go to Pa | art 2. | | | | | | | | |
| | Yes. | | | | | | | | | |
| 2. | identify what typ possible, list the Part 1. If more t | priority unsecured claims. De of claim it is. If a claim hase claims in alphabetical order than one creditor holds a part tition of each type of claim, see | both priority and according to the ticular claim, list t | nonpriority am creditor's nam he other credit | nounts, list that one. If you have noors in Part 3. | claim here a lore than tw | and show both priority | and nonprior | rity amount | s. As much as |
| | (i oi aii oxpiana | alon of odon type of oldini, oc | | | | 50011101.7 | Total claim | Priority amount | | Nonpriority amount |
| 2.1 | | ment Security Division | on Last | 4 digits of ac | count number | 3768 | \$3,000.00 | | \$0.00 | \$3,000.00 |
| | 500 F T | Initial Charact | Whe | en was the del | bt incurred? | 2014-20 | 015 | <u> </u> | | |
| | Carson | City, NV 89713-0030 reet City State Zlp Code | As o | of the date you | ı file, the claim | is: Check | all that apply | | | |
| | Who incurred | I the debt? Check one. | | Contingent | · | | 11.7 | | | |
| | Debtor 1 or | nly | | Jnliquidated | | | | | | |
| | Debtor 2 or | nly | | Disputed | | | | | | |
| | Debtor 1 a | nd Debtor 2 only | | - | unsecured cla | im: | | | | |
| | ☐ At least on | e of the debtors and another | | Domestic suppo | ort obligations | | | | | |
| | | his claim is for a communi | ty debt | | ain other debts y | | e government ou were intoxicated | | | |
| | Is the claim s | ubject to offset? | | Other. Specify | Wages, sa | laries, a | nd commission | S | | |
| | ☐ Yes | | _ ` | other. Openly | Est. unem | | | | | |
| | | | | | | | | | | |
| | | l of Your NONPRIORITY | | | | | | | | |
| 3. | Do any creditors have nonpriority unsecured claims against you? | | | | | | | | | |
| | ■ No. You hav■ Yes. | e nothing to report in this pa | rt. Submit this for | m to the court | with your other | schedules. | | | | |
| 4. | List all of your unsecured claim | nonpriority unsecured clain, list the creditor separately or holds a particular claim, lis | for each claim. F | or each claim l | isted, identify w | nat type of o | claim it is. Do not list of | claims already | y included i | in Part 1. If more |

Total claim

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 26 of 62

| Debtor Debtor | 1 Jesus Cibrian2 Leslie K Cibrian | | Case number (if know) | |
|------------------|---|--|--|----------|
| 4.1 | Aargon | Last 4 digits of account number | 0037 | \$483.99 |
| | Nonpriority Creditor's Name 8668 Spring Mountain Rd Las Vegas, NV 89117 | When was the debt incurred? | 2015 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Business d | ebt | |
| 4.2 | ADT Nonpriority Creditor's Name | Last 4 digits of account number | 6947 | \$612.00 |
| | PO Box 650485 Dallas, TX 75265-0485 | When was the debt incurred? | 2015 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Business of | ebt | |
| 4.3 | AFNI Inc Nonpriority Creditor's Name | Last 4 digits of account number | 5901 | \$0.00 |
| | PO Box 3517 Bloomington, IL 61702-3517 | When was the debt incurred? | 2015 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Business C | able debt | |
| | | | | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 27 of 62

| Debtor Debtor | 1 Jesus Cibrian 2 Leslie K Cibrian | | Case number (if know) | |
|------------------|--|--|--|------------|
| 4.4 | AHS Group | Last 4 digits of account number | unk. | \$3,984.00 |
| | Nonpriority Creditor's Name Restaurant Services 4350 Arville St. Building A #9 | When was the debt incurred? | 4/24/2015 | |
| | Las Vegas, NV 89103 Number Street City State Zip Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | _ | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharing | | |
| | Yes | Other. Specify business d | ebt | |
| 4.5 | America First Credit U | Last 4 digits of account number | 4481 | \$0.00 |
| | Nonpriority Creditor's Name 1344 West 4675 South | When was the debt incurred? | 2005-2010 | <u> </u> |
| | Ogden, UT 84409 Number Street City State Zlp Code | As of the date you file, the claim i | s: Chack all that apply | |
| | Who incurred the debt? Check one. | As of the date you me, the claim | 5. Спеск ан так арру | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | <u> </u> | | |
| | ■ Debtor 1 and Debtor 2 only | ■ Unliquidated | | |
| | At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | 1 claim: | |
| | _ | Student loans | a ciaiiii. | |
| | ■ Check if this claim is for a community debt Is the claim subject to offset? | _ | ration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify credit card | | |
| 4.6 | America First Credit U | Last 4 digits of account number | 0011 | \$0.00 |
| | Nonpriority Creditor's Name Attn: Bnakruptcy | When was the debt incurred? | 2005-2010 | ψο.σσ |
| | PO Box 9199 Ogden, UT 84409 Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 28 of 62

| Debtor 1 Debtor 2 | Jesus Cibrian Leslie K Cibrian | | Case number (if know) | |
|----------------------|--|--|--|--------|
| | American Honda Finance | Last 4 digits of account number | 6885 | \$0.00 |
| | Nonpriority Creditor's Name PO Box 168088 Irving, TX 75016 | When was the debt incurred? | 2008-2013 | |
| ī | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| 1 | Debtor 1 only | ☐ Contingent | | |
| I | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| I | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community | ☐ Student loans | | |
| | debt s the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| 1 | □Yes | Other. Specify Auto Ioan | | |
| I | American Honda Finance Nonpriority Creditor's Name | Last 4 digits of account number | 6385 | \$0.00 |
| 1 | PO Box 168088 Irving, TX 75016 | When was the debt incurred? | 2007-2010 | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | _ | | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community | Student loans | | |
| | debt s the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| 1 | ☐ Yes | Other. Specify Automobile | loan | |
| | Americas Servicing Company | Last 4 digits of account number | 9086 | \$0.00 |
| I | Nonpriority Creditor's Name PO Box 10328 Des Moines, IA 50306 | When was the debt incurred? | 2008 | |
| Ī | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| 1 | Debtor 1 only | ☐ Contingent | | |
| 1 | Debtor 2 only | ■ Unliquidated | | |
| 1 | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| 1 | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community | ☐ Student loans | | |
| • | debt s the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| 1 | Yes | ■ Other. Specify Foreclosed | house | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 29 of 62

| Debtor Debtor | 1 Jesus Cibrian 2 Leslie K Cibrian | | | |
|------------------|--|--|--|--------|
| 4.1 | Amex | | 6593 | \$0.00 |
| 0 | Nonpriority Creditor's Name | Last 4 digits of account number | | \$0.00 |
| | Correspondence PO Box 981540 | When was the debt incurred? | 1997-2009 | |
| | El Paso, TX 79998 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | , | | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ■ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | _ | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Credit card | | |
| 4.1 | Bank of America | Last 4 digits of account number | 5591 | \$0.00 |
| | Nonpriority Creditor's Name NC4-105-03-14 PO Box 26012 | When was the debt incurred? | 2003-2009 | |
| | Greensboro, NC 27410 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify Credit Card | | |
| 4.1 | Bank of America | Last 4 digits of account number | 5686 | \$0.00 |
| | Nonpriority Creditor's Name NC4-105-03-14 PO Box 26012 | When was the debt incurred? | 1988-2010 | |
| | Greensboro, NC 27410 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ■ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | <u></u> | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify credit card | | |
| | | | | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 30 of 62

| Debtor 1 Jesus Cibrian Leslie K Cibrian | | Case number (if know) | |
|---|---|---|-------------|
| Bank of America | Last 4 digits of account number | 5880 | \$0.00 |
| Nonpriority Creditor's Name NC4-105-03-14 PO Box 26012 Greensboro, NC 27410 | When was the debt incurred? | 2007-2012 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ■ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Credit Card | <u> </u> | |
| Barclays Bank Delaware | Last 4 digits of account number | 6310 | \$16,756.77 |
| Nonpriority Creditor's Name PO Box 8801 Wilmington, DE 19899 | When was the debt incurred? | 2006-2015 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ■ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ■ Check if this claim is for a community | ☐ Student loans | | |
| debt | | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | Debts to pension or profit-sharin | | |
| Yes | Other. Specify credit card | | |
| | | E&H Distributing Company, | |
| Beverly Salhanick, Esq. P.C. | Last 4 digits of account number | Inc. | \$5,507.58 |
| Nonpriority Creditor's Name 2001 S. Jones Blvd. Suite #1 | When was the debt incurred? | 2015 | |
| Las Vegas, NV 89146 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ■ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ■ Uniliquidated □ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community | Student loans | | |
| debt | | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | Debts to pension or profit-sharing | | |
| Yes | ■ Other. Specify Attorney Fe | ees & Costs | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 31 of 62

| Debto Debto | or 1 Jesus Cibrian or 2 Leslie K Cibrian | | Case number (if know) | |
|----------------|--|--|--|-------------|
| 4.1 6 | BYI Collection Services | Last 4 digits of account number | 3741 | \$576.43 |
| | Nonpriority Creditor's Name PO Box 1313 Malvorn BA 10355 0653 | When was the debt incurred? | 2015 | |
| | Malvern, PA 19355-0653 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify business d | ebt -Southwest gas | |
| 4.1 7 | Century Link | Last 4 digits of account number | 5901 | \$1,026.99 |
| | Nonpriority Creditor's Name 3341 W Sahara Ave | When was the debt incurred? | | |
| | Las Vegas, NV 89117 Number Street City State Zlp Code | As of the date you file, the claim i | e. Chack all that apply | |
| | Who incurred the debt? Check one. | As of the date you file, the claim | 5. Спеск ан тас арргу | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ■ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | _ ` | | |
| | ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | | ration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other Specify Service | | |
| 4.1 | Chase | Last 4 digits of account number | 8522 | \$18,836.52 |
| 8 | Nonpriority Creditor's Name | Last 4 digits of account number | | 410,000.02 |
| | Attn: Correspondence Dept PO Box 15298 | When was the debt incurred? | 2007-2015 | |
| | Wilmington, DE 19850 Number Street City State Zlp Code | As of the date you file, the claim i | a. Chack all that apply | |
| | Who incurred the debt? Check one. | As of the date you file, the claim | s: Спеск ан that арргу | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | _ | | |
| | ■ Debtor 1 and Debtor 2 only | ■ Unliquidated | | |
| | ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community | Student loans | | |
| | debt | _ | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | , | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 32 of 62

| Debtor 2 | Jesus Cibrian Leslie K Cibrian | | Case number (if know) | |
|----------|--|---|--|------------|
| 4.1 9 | Chase | Last 4 digits of account number | 8270 | \$5,521.87 |
| | Nonpriority Creditor's Name Attn: Correspondence Dept. PO Box 15298 Wilmington, DE 19850 | When was the debt incurred? | 2013-2015 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | | |
| 4.2 | Chase Nonpriority Creditor's Name | Last 4 digits of account number | 7808 | \$0.00 |
| | Attn: Correspondence Dept. PO Box 15298 | When was the debt incurred? | 2005-2010 | |
| | Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ■ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify credit card | | |
| 4.2 | Chase | Last 4 digits of account number | 9800 | \$0.00 |
| | Nonpriority Creditor's Name Attn: Correspondence Dept. PO Box 15298 | When was the debt incurred? | 2004-2006 | |
| - | Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Credi card | | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 33 of 62

| Debt Debt | or 1 Jesus Cibrian Or 2 Leslie K Cibrian | | Case number (if know) | |
|--------------|---|--|---|------------|
| 4.2 2 | Citibank/Best Buy | Last 4 digits of account number | 8251 | \$0.00 |
| | Nonpriority Creditor's Name Centralized Bankruptcy CitiCorp Credit PO Box 790040 Saint Louis, MO 63179 | When was the debt incurred? | 2006-2010 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | □ Yes | Other. Specify Credit Card | <u> </u> | |
| 1.2 3 | Citibank/The Home Depot | Last 4 digits of account number | 6264 | \$3,874.27 |
| | Nonpriority Creditor's Name Citicorp Credit Servicces Centralized BK PO Box 790040 Seint Louis MO 62170 | When was the debt incurred? | 1999-2015 | |
| | Saint Louis, MO 63179 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ■ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | I | |
| 1.2 1 | CNBA | Last 4 digits of account number | 5823 | \$0.00 |
| | Nonpriority Creditor's Name PO Box 6283 | When was the debt incurred? | 1998-2007 | |
| | Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ■ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Credit card | | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 34 of 62

| Debt Debt | tor 1 Jesus Cibrian Leslie K Cibrian | Case number (if know) | | |
|--------------|--|--|---|-------------|
| 4.2 5 | Comenity Bank/Ann Taylor | Last 4 digits of account number | 7864 | \$0.00 |
| | Nonpriority Creditor's Name PO Box 18125 | When was the debt incurred? | 2007-2009 | |
| | Columbus, OH 43218 Number Street City State Zlp Code | A of the data you file the claim i | Graduali di di attanza | |
| | Who incurred the debt? Check one. | As of the date you file, the claim i | s: Спеск ан tnat apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ■ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Credit card | | |
| 4.2 6 | Discover | Last 4 digits of account number | 1078 | \$0.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy PO Box 3025 | When was the debt incurred? | 2006-2012 | |
| | New Albany, OH 43054 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ■ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Credit card | | |
| | E & H Distributing Company, Inc. | Last 4 digits of account number | | \$40,548.19 |
| | Nonpriority Creditor's Name dba U.S. Foodservice | When was the debt incurred? | 2013-2015 | · |
| | 300 W. Bonana Las Vegas, NV 89106 | When was the dest mounted. | 2013-2013 | |
| 4.2 | Number Street City State Zlp Code | As of the date you file, the claim i | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? ■ No | report as priority claims Debts to pension or profit-sharin | o plans, and other similar debts | |
| | ■ No □ Yes | · · | | |
| | □ res | Other. Specify | Lease and business products. | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 35 of 62

| First National Bank Nonpriority Creditor's Name | Last 4 digits of account number | 1504 | \$0.0 |
|--|--|---|---------|
| Attn: FNN Legal Dept. 1620 Dodge St. Mailstop Code 3290 Omaha, NE 68191 | When was the debt incurred? | 1998-2006 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ■ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ■ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Credit Card | <u></u> | |
| Ford Motor Credit | Last 4 digits of account number | 2961 | \$0.0 |
| Nonpriority Creditor's Name PO Box 62180 | When was the debt incurred? | 2008-2013 | |
| Colorado Springs, CO 80962 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ■ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ■ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| Yes | ■ Other. Specify Auto Loan | g prants, and care. Carried accept | |
| | | | |
| Gasket Guy | Last 4 digits of account number | oice | \$433.3 |
| Nonpriority Creditor's Name 3680 W. Reno Ave. Las Vegas, NV 89118 | When was the debt incurred? | 2015 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ■ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | a place and other similar date. | |
| ■ No | Debts to pension or profit-sharin | | |
| ☐ Yes | Other. Specify business d | ebt | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 36 of 62

| ebtor 1 Jesus Cibrian ebtor 2 Leslie K Cibrian | | Case number (if know) | |
|--|---|---|-------------|
| 3 Home Depot | Last 4 digits of account number | 6264 | \$3,874.27 |
| Nonpriority Creditor's Name PO Box 78011 | When was the debt incurred? | 2015 | |
| Phoenix, AZ 85062-8011 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is | | |
| Debtor 1 only | Пан | | |
| Debtor 2 only | Contingent | | |
| ■ Debtor 1 and Debtor 2 only | Unliquidated | | |
| ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | claim | |
| <u>_</u> | Student loans | Cidini. | |
| Check if this claim is for a community debt Is the claim subject to offset? | _ | ation agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify business de | ebt | |
| 3 Jerry Mullen | Last 4 digits of account number | unknown | Unknown |
| Nonpriority Creditor's Name 584 Convention Court | When was the debt incurred? | 2015-2016 | |
| Irwin, PA 15642 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ■ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | claim: | |
| Check if this claim is for a community debt | | ation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| No | Debts to pension or profit-sharing | • • | |
| Yes | ■ Other. Specify Personal lo | an | |
| Kamran & Co., Inc | Last 4 digits of account number | 9129 | \$11,336.10 |
| 411 E. Montecito St. Santa Barbara, CA 93101 | When was the debt incurred? | 4/27/14 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is | s: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | claim: | |
| Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | report as priority claims | ation agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | | |
| Yes | Other. Specify Business do | ebt | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 37 of 62

| Debto Debto | or 1 Jesus Cibrian or 2 Leslie K Cibrian | Case number (if know) | | | | |
|----------------|--|---|------------|--|--|--|
| 4.3 4 | Las Vegas Pest Control | Last 4 digits of account number 6436 | \$250.00 | | | |
| | Nonpriority Creditor's Name 1850 Whitney Mesa Drive #150 Henderson, NV 89014 | When was the debt incurred? | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ■ Unliquidated | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | |
| | ■ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Yes | ■ Other. Specify Business Debt | | | | |
| 4.3 5 | Mobile Mini | Last 4 digits of account number 7740 | \$422.70 | | | |
| | Nonpriority Creditor's Name 4646 E Van Buren Suite 400 Phoenix, AZ 85008 | When was the debt incurred? 5/2015 | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | Unliquidated | | | | |
| | ■ Debtor 1 and Debtor 2 only | □ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | |
| | ■ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Yes | ■ Other. Specify Business Expense | | | | |
| 4.3 6 | NV Energy | Last 4 digits of account number 2622 | \$3,773.22 | | | |
| | Nonpriority Creditor's Name 6226 W. Sahara Ave. Las Vegas, NV 89151 | When was the debt incurred? 2015 | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | |
| | Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Yes | ■ Other. Specify business debt | | | | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 38 of 62

| Debt Debt | or 1 Jesus Cibrian or 2 Leslie K Cibrian | | Case number (if know) | |
|--------------|---|--|---|------------|
| 4.3 7 | Southern Highlands Community Association | Last 4 digits of account number | 4640 | \$1,293.17 |
| | Nonpriority Creditor's Name 11411 Southern Highlands Pkwy #100 | When was the debt incurred? | 2015-2016 | |
| | NY 12931-7000 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify HOA fees F | Foreclosed house | |
| 4.3 8 | Southwest Gas | Last 4 digits of account number | 2012 | Unknown |
| | Nonpriority Creditor's Name 5421 Spring Mountain Road Las Vegas, NV 89150 | When was the debt incurred? | 2014-2015 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. As of the date you file, the claim | | is: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify business d | ebt | |
| 4.3 9 | Synchrony Bank/ JC Penneys | Last 4 digits of account number | 5974 | \$0.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy PO Box 103104 | When was the debt incurred? | 2007-2016 | |
| | Roswell, GA 30076 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ■ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Type of NONPRIORITY unsecured | | | |
| | | | d claim: | |
| | ■ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sens | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | agreement of diverse that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Credit card | | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 39 of 62

| btor 1 Jesus Cibrian btor 2 Leslie K Cibrian | | Case number (if know) | |
|---|---|---|----------|
| Synchrony Bank/Lowes | Last 4 digits of account number | 9001 | \$0.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy PO Box 103104 Roswell, GA 30076 | When was the debt incurred? | 2003-2008 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sens | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | tration agreement of divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify credit card | | |
| Target | Last 4 digits of account number | 5751 | \$0.00 |
| Nonpriority Creditor's Name C/O Financial and Retail Services Mailstop BT PO Box 9475 | When was the debt incurred? | 2008-2011 | |
| Minneapolis, MN 55440 | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| Debtor 1 only | Пол | | |
| Debtor 2 only | ☐ Contingent | | |
| Debtor 1 and Debtor 2 only | Unliquidated | | |
| ☐ At least one of the debtors and another | ☐ Disputed | d alaine | |
| | Type of NONPRIORITY unsecured ☐ Student loans | d Claim: | |
| Check if this claim is for a community debt Is the claim subject to offset? | _ | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | ng plans, and other similar debts | |
| ☐ Yes | Other Specify Credit Card | <u> </u> | |
| Total Safety | Last 4 digits of account number | 0037 | \$463.99 |
| Nonpriority Creditor's Name c/o Aargon Collection Agency 8668 Spring Mountain Road Las Vegas, NV 89117 | When was the debt incurred? | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ■ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Service | | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 40 of 62

| Debtor Debtor | 1 Jesus Cibrian 2 Leslie K Cibrian | Case number (if know) | | | |
|------------------|--|--|---|-------------|--|
| 4.4 | VEDC | Last 4 digits of account number | 0202 | \$40,548.19 | |
| | Nonpriority Creditor's Name 5121 Van Nuys Blvd 3rd Floor Shorman Oaks CA 01403 | When was the debt incurred? | 2013-2015 | | |
| | Sherman Oaks, CA 91403 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | Unliquidated | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ■ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | П | Supplies) | lebt (Loan, Equipment & | | |
| | Yes | Other. Specify Amount as | indicated in pending lawsuit. | | |
| 4.4 | Wells Fargo Bank NA/Na | Last 4 digits of account number | 1998 | \$0.00 | |
| | Nonpriority Creditor's Name MAC 8235-02F PO Box 10438 | When was the debt incurred? | 2004-2006 | | |
| | Des Moines, IA 50306 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | Unliquidated | | | |
| | ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | | |
| | ■ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | |
| 4.4 5 | Wells Fargo Bank NV Na Nonpriority Creditor's Name | Last 4 digits of account number | 4235 | \$24,045.00 | |
| | 1 Home Campus x2303-01A PO BOX 10438 | When was the debt incurred? | 2006 | | |
| | Des Moines, IA 50326 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | □ Debtor 2 only | ■ Unliquidated | | | |
| | ■ Debtor 1 and Debtor 2 only | ■ Unliquidated □ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | Check if this claim is for a community | Student loans | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | |
| | No | Debts to pension or profit-sharing | ng plans, and other similar debts | | |
| | □Yes | ■ Other. Specify Credit card | | | |
| | | - Other specify | | | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 41 of 62

| | or 2 Leslie K Cibrian | | Case number (if know) | |
|---------------|---|--|---|-------------------------------|
| 4.4 | Wilson Elser | Lock A digito of account number | Road | \$0.00 |
| 6 | Nonpriority Creditor's Name | Last 4 digits of account number | | Ψ0.00 |
| | 300 S. 4th Street 11th Floor | When was the debt incurred? | | |
| | Las Vegas, NV 89101 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | | | |
| | Debtor 2 only | Contingent | | |
| | _ | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | Lateta | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | i ciaim: | |
| | Check if this claim is for a community debt | | ration agreement or divorce that you did | Inot |
| | Is the claim subject to offset? | report as priority claims | ration agreement of divorce that you did | Hiot |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify property | ease payments on business | |
| D1 (| List Others to De Notified About a D | | | |
| Part 3 | | • | | |
| is tr | this page only if you have others to be notified ying to collect from you for a debt you owe to e more than one creditor for any of the debts the fied for any debts in Parts 1 or 2, do not fill ou | someone else, list the original creditor in hat you listed in Parts 1 or 2, list the addi | Parts 1 or 2, then list the collection a | gency here. Similarly, if you |
| Name | and Address | On which entry in Part 1 or Part 2 did you | list the original creditor? | |
| AFNI | | | Part 1: Creditors with Priority Unsecure | |
| _ | Box 3517 omington, IL 61702-3517 | - | Part 2: Creditors with Nonpriority Unser | cured Claims |
| | | Last 4 digits of account number | | |
| Name | and Address | On which entry in Part 1 or Part 2 did you | list the original creditor? | |
| | erly Salhanick, Esq. P.C. | Line 4.27 of (Check one): | Part 1: Creditors with Priority Unsecure | ed Claims |
| 2001 Suite | S. Jones Blvd. | | Part 2: Creditors with Nonpriority Unser | cured Claims |
| | Vegas, NV 89146 | | | |
| | | Last 4 digits of account number | 302C | |
| Name | and Address | On which entry in Part 1 or Part 2 did you | list the original creditor? | |
| | Collection Services, LLC | Line 4.38 of (Check one): | Part 1: Creditors with Priority Unsecure | ed Claims |
| | Box 1313 vern, PA 19355-0653 | • | Part 2: Creditors with Nonpriority Unser | cured Claims |
| iviaiv | em, FA 19333-0033 | Last 4 digits of account number | 3741 | |
| Nama | | On which entry in Port 1 or Port 2 did you | list the evicinal evaditor? | |
| | and Address I Services | On which entry in Part 1 or Part 2 did you Line 4.14 of (<i>Check one</i>): | list the original creditor? Part 1: Creditors with Priority Unsecure | ed Claims |
| | Box 60517 | | Part 2: Creditors with Nonpriority Unser | |
| City | of Industry, CA 91716-0517 | Last 4 digits of account number | | |
| | | Last 4 digits of account number | 6310 | |
| | and Address | On which entry in Part 1 or Part 2 did you | _ | |
| | tury Link W Sahara Ave | | Part 1: Creditors with Priority Unsecure | |
| | Vegas, NV 89117 | - | Part 2: Creditors with Nonpriority Unser | cured Claims |
| | | Last 4 digits of account number | 8676 | |
| Name | and Address | On which entry in Part 1 or Part 2 did you | list the original creditor? | |
| Qual | ley Law Group | | Part 1: Creditors with Priority Unsecure | ed Claims |
| | Paseo Del Prado | - | Part 2: Creditors with Nonpriority Unser | cured Claims |
| | ı. B, Suite 205 Vegas, NV 89102 | | | |
| | | Last 4 digits of account number | 4235 | |
| Name | and Address | On which entry in Part 1 or Part 2 did you | list the original creditor? | |
| | | • | • | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 42 of 62

| Debtor 1 Jesus Cibrian Leslie K Cibrian | Case number (if know) | | | |
|---|---|---|--|--|
| Red Rock Financial Services | Line <u>4.37</u> of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | | |
| 4775 W. Teco Avenue Suite #140 | | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Las Vegas, NV 89118 | Last 4 digits of account number | 5395 | | |
| Name and Address | On which entry in Part 1 or Part 2 did y | ou list the original creditor? | | |
| Southwest Gas | Line 4.16 of (<i>Check one</i>): | Part 1: Creditors with Priority Unsecured Claims | | |
| | Last 4 digits of account number | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Name and Address | On which entry in Part 1 or Part 2 did y | ou list the original creditor? | | |
| United Collection Bureau | Line <u>4.23</u> of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | | |
| 5620 South Wyck Blvd. #206 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Toledo, OH 43614 | Last 4 digits of account number | 3730 | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | | Total Claim |
|--------------------|-----|---|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 3,000.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 3,000.00 |
| | | | | | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ | 0.00 |
| claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that | 0 | • | 0.00 |
| | 01 | you did not report as priority claims | 6g. | \$ | |
| | 6h. | 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3 | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 184,168.56 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 184,168.56 |

| Fill in this infor | | | | | |
|---|------------------|--------------------|-----------|---|------------|
| Debtor 1 | Jesus Cibrian | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Leslie K Cibrian | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | DISTRICT OF NEVADA | | | |
| Case number | | | | | |
| (if known) | | | | [| Check if t |
| | | | | | amended |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Р | erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|-----|---|---|
| 2.1 | ADT PO Box 650485 Dallas, TX 75265-0485 | Security contract to be rejected. |
| 2.2 | AFNI Inc PO Box 3517 Bloomington, IL 61702-3517 | Unexpired Cable contract to be rejected. |
| 2.3 | E & H Distributing Company, Inc. dba U.S. Foodservice c/o Beverly Salhanick, Esq., P.C. 300 W. Bonana Las Vegas, NV 89106 | Unexpired equipment lease to be rejected. |
| 2.4 | NV Energy 6226 W. Sahara Ave. Las Vegas, NV 89151 | Unexpired Electric contract to be rejected. |
| 2.5 | Southwest Gas 5421 Spring Mountain Road Las Vegas, NV 89150 | Unexpired Energy contract to be rejectred. |
| 2.6 | Wilson Elser 300 S. 4th Street 11th Floor Las Vegas, NV 89101 | Unexpired buiness rental contract to be rejected. |

Official Form 106G

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 44 of 62

| | | | | | 9 |
|--------------------------------|---|-------------------------------|-------------------------|---|---|
| Fill in this i | information to identify your | case: | | | |
| Debtor 1 | Jesus Cibrian | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing | Leslie K Cibrian First Name | Middle Name | Last Name | | |
| , , | es Bankruptcy Court for the: | DISTRICT OF NEVADA | | | |
| Case numb | or | | | | |
| (if known) | еі | | | | Check if this is an amended filing |
| Official | Form 106H | | | | |
| | | abtera | | | |
| Schea | ule H: Your Cod | eptors | | | 12/15 |
| • | and case number (if known) ou have any codebtors? (If | | | as a codebtor. | |
| ■ No □ Yes | | | | | |
| | in the last 8 years, have you a, California, Idaho, Louisiana | | | | y states and territories include |
| _ | | , | , , | , | |
| | Go to line 3. Did your spouse, former spo | use or legal equivalent live | e with you at the time? | | |
| □ res. | Dia your spouse, former spor | use, or legal equivalent live | e with you at the time: | | |
| in line : Form 1 | 2 again as a codebtor only i | f that person is a guaran | tor or cosigner. Make s | sure you have listed th | g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor ame, Number, Street, City, State and Z | IP Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt es that apply: |
| 3.1 | | | | ☐ Schedule D, line | е |
| | lame | | | ☐ Schedule E/F, I | |
| | | | | ☐ Schedule G, lin | e |
| | lumber Street City | State | ZIP Code | _ | |
| 3.2 | | | | ☐ Schedule D, line | e |
| | lame | | | _ ☐ Schedule E/F, I | |
| | | | | ☐ Schedule G, lin | e |
| | lumber Street | 0 | 715.0 | _ | |
| C | City | State | ZIP Code | | |

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| Fill in th | his inform | mation to identify your | c350: | | | | | |
|----------------------|--|---|---|--------------|------------|----------------------------|-----------|--|
| | | | case. | | | | | |
| Debtor ' | 1 | Jesus Cibrian First Name | Middle Name | Lac | st Name | | | |
| Debtor 2 | 2 | Leslie K Cibrian | Middle Name | Las | ot ivallie | | | |
| (Spouse if | | First Name | Middle Name | Las | st Name | | | |
| United S | States Ba | nkruptcy Court for the: | DISTRICT OF NEVADA | | | | | |
| Case nu | ımher | | | | | | | |
| (if known) | _ | | | | | | | Check if this is an amended filing |
| Dec If two m You mus | larat arried pe st file this ig money r both. 18 | eople are filing togethe s form whenever you fi or property by fraud in 8 U.S.C. §§ 152, 1341, 1 | n Individual r, both are equally respond the bankruptcy schedules in connection with a bank 1519, and 3571. | nsible for s | upplyir | ng correct information. | | |
| | Sigr | n Below | | | | | | |
| Die | d you pa | y or agree to pay some | one who is NOT an attori | ney to help | you fil | l out bankruptcy forms? | • | |
| _ | No | | | | | | | |
| | Yes. N | Name of person | | | | | | etition Preparer's Notice, nature (Official Form 119) |
| | | lty of perjury, I declare e true and correct. | that I have read the sum | mary and s | chedul | es filed with this declara | ation and | |
| х | /s/ Jesi | us Cibrian | | х | /s/ Le | slie K Cibrian | | |
| | | Cibrian | | | Leslie | e K Cibrian | | |
| | Signatur | re of Debtor 1 | | | Signat | ture of Debtor 2 | | |
| | Date _ | April 30, 2016 | | | Date | April 30, 2016 | | |

| Fill in | this inform | nation to identify you | rase. | | | |
|----------------|---------------------|--|--|---|---|---|
| Debto | | Jesus Cibrian | ouse. | | | |
| Вовіо | | First Name | Middle Name | Last Name | | |
| Debto | | Leslie K Cibrian | ACT III AL | | | |
| (Spouse | e if, filing) | First Name | Middle Name | Last Name | | |
| United | d States Ba | nkruptcy Court for the: | DISTRICT OF NEVADA | | | |
| Case (if know) | number _ | | | | | heck if this is an mended filing |
| Stat | ement | and accurate as possi | | re filing together, both are | ankruptcy equally responsible for suppy additional pages, write you | |
| numbe | | n). Answer every ques | stion. rital Status and Where You | Lived Refere | | |
| | | r current marital statu | | Liveu Belore | | |
| | Married Not mar | ried | | | | |
| 2. D | uring the la | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | No Yes. Lis | t all of the places you l | ived in the last 3 years. Do no | ot include where you live now | <i>ı</i> . | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| | | | | | ity property state or territory ico, Texas, Washington and W | |
| | | ike sure you fill out Sch | nedule H: Your Codebtors (Ot | ficial Form 106H). | | |
| Part 2 | Explai | n the Sources of You | r Income | | | |
| Fi | II in the tota | al amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part- | | ndar years? |
| □ ■ |] No I Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$39,807.00 | ☐ Wages, commissions, bonuses, tips | \$0.00 |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

| Debtor 2 Leslie K Cibrian | | Case | Case number (if known) | | | |
|--|--|---|--|---|--|--|
| | Debtor 1 | | Debtor 2 | | | |
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | |
| | ☐ Wages, commissions, bonuses, tips | \$0.00 | ☐ Wages, commissions, bonuses, tips | \$0.00 | | |
| | Operating a business | | ☐ Operating a business | | | |
| For last calendar year: (January 1 to December 31, 2015) | ■ Wages, commissions, bonuses, tips | \$43,043.00 | ☐ Wages, commissions, bonuses, tips | \$0.00 | | |
| | ☐ Operating a business | | ☐ Operating a business | | | |
| | ☐ Wages, commissions, bonuses, tips | \$0.00 | ☐ Wages, commissions, bonuses, tips | \$0.00 | | |
| | Operating a business | | ☐ Operating a business | | | |
| For the calendar year before that: (January 1 to December 31, 2014) | ☐ Wages, commissions, bonuses, tips | \$0.00 | ☐ Wages, commissions, bonuses, tips | \$0.00 | | |
| | Operating a business | | ☐ Operating a business | | | |
| List each source and the gross inc No Yes. Fill in the details. | ome from each source separa | ately. Do not include income th | hat you listed in line 4. | | | |
| | Debtor 1 | | Debtor 2 | | | |
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) | | |
| For last calendar year: (January 1 to December 31, 2015) | Pension | \$19,588.00 | | | | |
| For the calendar year before that: (January 1 to December 31, 2014) | Interest income | \$267.00 | | | | |
| Day 2 List Contain Downsonto Voc | · Mada Dafara Vari Filad for | Dankaratar | | | | |
| 6. Are either Debtor 1's or Debtor 2 | u Made Before You Filed for 2's debts primarily consume Debtor 2 has primarily consuments of the primarily consuments of the personal, family, or househouse the personal of t | r debts? umer debts. Consumer debts | s are defined in 11 U.S.C. § 1 | 01(8) as "incurred by an | | |
| During the 90 days bef ☐ No. Go to line | ore you filed for bankruptcy, d | id you pay any creditor a total | I of \$6,425* or more? | | | |
| ☐ Yes List below paid that c not include | each creditor to whom you pa reditor. Do not include paymen payments to an attorney for to not on 4/01/19 and every 3 year | nts for domestic support oblig his bankruptcy case. | ations, such as child support | and alimony. Also, do | | |

Official Form 107

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 48 of 62

| | btor 1 Jesus Cibrian Leslie K Cibrian | | Cas | se number (if known) | |
|----|---|--|--|---|--|
| | Yes. Debtor 1 or Debtor 2 or both During the 90 days before you | | | al of \$600 or more | ? |
| | ■ No. Go to line 7. | | | | |
| | ☐ Yes List below each cre | for domestic support obligation | | | you paid that creditor. Do not Also, do not include payments to an |
| | Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| 7. | Within 1 year before you filed for bankru Insiders include your relatives; any genera of which you are an officer, director, person a business you operate as a sole proprieto alimony. No | I partners; relatives of any gen in control, or owner of 20% | eneral partners; partners or more of their voting | erships of which yog g securities; and a | ou are a general partner; corporation ny managing agent, including one fo |
| | ☐ Yes. List all payments to an insider. | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Include payments on debts guaranteed or ■ No □ Yes. List all payments to an insider | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| Pa | rt 4: Identify Legal Actions, Repossess | sions, and Foreclosures | | | |
| 9. | Within 1 year before you filed for bankru List all such matters, including personal inj modifications, and contract disputes. | uptcy, were you a party in a | | | |
| | □ No | | | | |
| | Yes. Fill in the details. | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the case |
| | Jesus Cibrian Leslie K Cibrian VS E & H Distribution c/o Beverly Salhanick, Esq. A-15-278302-C | Business debt | Justice Court Las Vegas Township 200 Lewis Avenue Las Vegas, NV 89101 | | □ Pending□ On appeal■ Concluded |
| | E & H Distributing Company, Inc. dba U.S. Foodservice vs. True Dreams, LLC also doing business as La Rue March Cafe; Jesus Cibrian and Leslie Cibrian A-15-728302-C | Demand for Payment | District Court (NV 200 Lewis Ave Las Vegas, NV | - | ■ Pending □ On appeal □ Concluded |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 49 of 62

| | otor 1 Jesus Cibrian totor 2 Leslie K Cibrian | Case number | (if known) | |
|-----|--|--|--------------------------|-----------------------|
| 10. | Within 1 year before you filed for bankrup Check all that apply and fill in the details belo | etcy, was any of your property repossessed, foreclosed | d, garnished, attached | l, seized, or levied? |
| | □ No. Go to line 11. | | | |
| | Yes. Fill in the information below. | | | |
| | Creditor Name and Address | Describe the Property | Date | Value of the |
| | | Explain what happened | | property |
| | America First Credit U 1344 West 4675 South Ogden, UT 84409 | Rental property on Firestead Dr Las Vegas NV | March 2016 | \$240,000.00 |
| | ogucii, or office | ☐ Property was repossessed. | | |
| | | ■ Property was foreclosed. | | |
| | | ☐ Property was garnished. | | |
| | | ☐ Property was attached, seized or levied. | | |
| | VEDC 5121 Van Nuys Blvd | Restaurant equipment | 2014-2015 | \$19,000.00 |
| | 3rd floor | ■ Property was repossessed. | | |
| | Sherman Oaks, CA 91403 | ☐ Property was foreclosed. | | |
| | | ☐ Property was garnished. | | |
| | | ☐ Property was attached, seized or levied. | | |
| | ■ No □ Yes. Fill in the details. Creditor Name and Address | Describe the action the creditor took | Date action was taken | Amount |
| 12. | Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or | etcy, was any of your property in the possession of an another official? | assignee for the bene | fit of creditors, a |
| | ■ No | | | |
| | Yes | | | |
| Par | List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift. | ptcy, did you give any gifts with a total value of more | than \$600 per person? | • |
| | | Describe the witte | Datas vari vari | Value |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | |
| 14. | ■ No | ptcy, did you give any gifts or contributions with a tot | al value of more than | \$600 to any charity? |
| | Yes. Fill in the details for each gift or co | | _ | |
| | Gifts or contributions to charities that to more than \$600 Charities (Number Street City, State and 710 Ceta) | · | Dates you contributed | Value |
| | Address (Number, Street, City, State and ZIP Code) | | | |

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 50 of 62

| Der | otor 2 | Leslie K Cibrian | | | Case number | (if known) | |
|-----|--|---|-------------------------|---|----------------------|-----------------------------------|---------------------------|
| Par | t 6: | List Certain Losses | | | | | |
| 15. | | n 1 year before you filed for bank mbling? | ruptcy or | since you filed for bankruptcy, did | you lose anyt | hing because of the | ft, fire, other disaster, |
| | _ ` | No ⁄es. Fill in the details. | | | | | |
| | | cribe the property you lost and the loss occurred | Include | be any insurance coverage for the the amount that insurance has paid. The claims on line 33 of Schedule A/B | List pending | Date of your loss | Value of property lost |
| Par | t 7: | List Certain Payments or Transfe | | | , , | | |
| 16. | consu | ulted about seeking bankruptcy o | r preparii | d you or anyone else acting on young a bankruptcy petition? s, or credit counseling agencies for se | | | rty to anyone you |
| | | No | | | | | |
| | Perso Addr | es. Fill in the details. on Who Was Paid ess il or website address | | Description and value of any protransferred | perty | Date payment or transfer was made | Amount of payment |
| | Person Who Made the Payment, if Not You Lawrence D. Rouse, Esq 523 S 8th St Las Vegas, NV 89101 rouselaw@aol.com | | retainer paid \$1,500 | | Nov 2015-Feb 2016 | \$1,500.00 | |
| | 8956 Orla | BK.com 5 Tuscan Valley Place ndo, FL 32825 ok.com | | cash paid by debtor for Credi Counseling | t | April 2016 | \$15.00 |
| 17. | promi | | reditors o | d you or anyone else acting on you r to make payments to your credito ed on line 16. | | or transfer any prope | rty to anyone who |
| | _ | No | | | | | |
| | | ∕es. Fill in the details. on Who Was Paid ess | | Description and value of any protransferred | perty | Date payment or transfer was made | Amount of payment |
| 18. | transf Includinclud | ferred in the ordinary course of y le both outright transfers and transfe e gifts and transfers that you have a No | our busin ers made a | as security (such as the granting of a | | • | |
| | | /es. Fill in the details. on Who Received Transfer ress | | Description and value of property transferred | | any property or received or debts | Date transfer was made |
| | Pers | on's relationship to you | | | paid iii ex | Citaliye | |
| 19. | benef | n 10 years before you filed for ba iiciary? (These are often called ass No Yes. Fill in the details. | | did you transfer any property to a ion devices.) | self-settled tru | ust or similar device | of which you are a |
| | Name | e of trust | | Description and value of the prop | perty transferr | ed | Date Transfer was made |

Official Form 107

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 51 of 62

| | otor 1 otor 2 | Jesus Cibrian Leslie K Cibrian | | | Case nu | mber (if known) | |
|-----|---------------------------|---|--|---|-------------------|--|---|
| Par | t 8: | List of Certain Financial Accounts, In | struments, Safe Depos | sit Boxes, and | Storage Un | its | |
| 20. | sold, Include house | in 1 year before you filed for bankrupto moved, or transferred? de checking, savings, money market, o es, pension funds, cooperatives, asso No Yes, Fill in the details. | or other financial acco | unts; certificate | es of depos | | |
| | Nam | ne of Financial Institution and ress (Number, Street, City, State and ZIP | Last 4 digits of account number | Type of acc instrument | ount or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | PO I | ls Fargo Box 60510 Angeles, CA 90060 | XXXX-4214 | ■ Checking □ Savings □ Money M □ Brokerag □ Other | arket | 2015 | \$0.00 |
| 21. | cash, | ou now have, or did you have within 1, or other valuables? No Yes, Fill in the details. | year before you filed fo | or bankruptcy, | any safe do | eposit box or other depo | sitory for securities, |
| | Nam | ne of Financial Institution ress (Number, Street, City, State and ZIP Code) | Who else had ac Address (Number, State and ZIP Code) | | Describe | e the contents | Do you still have it? |
| 22. | Have | re you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | |
| | = | No Yes. Fill in the details. | | | | | |
| | | ne of Storage Facility ress (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, State and ZIP Code) | | Describe | e the contents | Do you still have it? |
| | 2830 | olic Storage 0 E. Desert Inn Rd Vegas, NV 89121 | Mateo Yupono 5605 Morning Court Las Vegas, NV | Snow | househ storage | member makes rent | □ No ■ Yes |
| Par | t 9: | Identify Property You Hold or Control | for Someone Else | | | | |
| 23. | Do yo | ou hold or control any property that so omeone. | | lude any prope | erty you bo | rrowed from, are storing | for, or hold in trust |
| | _ | No Yes. Fill in the details. | | | | | |
| | | ner's Name ress (Number, Street, City, State and ZIP Code) | Where is the pro (Number, Street, City, Code) | | Describe | e the property | Value |

Jesus Cibrian Debtor 1 Leslie K Cibrian Debtor 2

Name of site

Address (Number, Street, City, State and ZIP Code)

Case number (if known)

| Pa | t 10: Give Details About Environmental Informa | ation | | |
|-----|--|--|--------------------------------------|-----------------------|
| For | the purpose of Part 10, the following definitions | apply: | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances. | ir, land, soil, surface water, groundwa | • • • | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposal | | , whether you now own, operate, o | or utilize it or used |
| | Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s | | aste, hazardous substance, toxic s | substance, |
| Rep | ort all notices, releases, and proceedings that yo | ou know about, regardless of when th | ney occurred. | |
| 24. | Has any governmental unit notified you that you | ı may be liable or potentially liable ur | nder or in violation of an environme | ental law? |
| | No | | | |
| | Yes. Fill in the details. | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | |
| | ■ No □ Yes. Fill in the details. | | | |

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

Governmental unit

ZIP Code)

| ■ No | | | |
|---------------------------|---|--------------------|--------------------|
| Yes. Fill in the details. | | | |
| Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case |

Address (Number, Street, City, State and

Part 11: Give Details About Your Business or Connections to Any Business

| 12 | art 11 | Give Details About Your Business or | Connections to Any Business | | |
|----|--------|--|---|--------------|---|
| 27 | . Wit | hin 4 years before you filed for bankrup | tcy, did you own a business or have any of | the follow | ing connections to any business? |
| | | ☐ A sole proprietor or self-employed | in a trade, profession, or other activity, eith | er full-time | or part-time |
| | | ☐ A member of a limited liability com | pany (LLC) or limited liability partnership (L | .LP) | |
| | | ☐ A partner in a partnership | | | |
| | | ☐ An officer, director, or managing ex | ecutive of a corporation | | |
| | | ☐ An owner of at least 5% of the votin | ng or equity securities of a corporation | | |
| | | No. None of the above applies. Go to | Part 12. | | |
| | | Yes. Check all that apply above and fil | I in the details below for each business. | | |
| | Ad | siness Name Idress mber, Street, City, State and ZIP Code) | Describe the nature of the business Name of accountant or bookkeeper | Do not in | r Identification number Iclude Social Security number or ITIN. Siness existed |
| | Tr | ue Dreams LLC | Closed restaurant | EIN: | 45-4701134 |

5605 Morning Snow Court Las Vegas, NV 89121

Environmental law, if you

know it

From-To 2013-2016

Date of notice

Case 16-12430-mkn Doc 1 Entered 04/30/16 15:39:56 Page 53 of 62

| Debtor 1 Jesus Cibrian Debtor 2 Leslie K Cibrian | c | Case number (if known) |
|--|---|---|
| 28. Within 2 years before you filed for bankrup institutions, creditors, or other parties. | Cibrian Case number (if known) defore you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial ditors, or other parties. The details below. Date Issued We ers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection as ean result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 1, 1519, and 3571. /s/ Leslie K Cibrian Leslie K Cibrian Signature of Debtor 2 | |
| ■ No □ Yes. Fill in the details below. | | |
| Name Address (Number, Street, City, State and ZIP Code) | Date Issued | |
| Part 12: Sign Below | | |
| | \$250,000, or imprisonment for up to 20 years. | |
| Jesus Cibrian | Leslie K Cibrian | |
| Signature of Debtor 1 | Signature of Debtor 2 | |
| Date April 30, 2016 | Date April 30, 2016 | |
| Did you attach additional pages to Your Statem No ☐ Yes | ent of Financial Affairs for Individuals Fili | ing for Bankruptcy (Official Form 107)? |
| Did you pay or agree to pay someone who is no ■ No | t an attorney to help you fill out bankrupt | cy forms? |
| ☐ Yes. Name of Person . Attach the Bankru | uptcy Petition Preparer's Notice, Declaration, | , and Signature (Official Form 119). |

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Nevada

| In re | Jesus Cibrian Leslie K Cibrian | | Case No. | | |
|--------------|---|-------------------------------------|------------------------|--------------------------------|---------|
| | | Debtor(s) | Chapter | 13 | |
| | DISCLOSURE OF COMPENS | SATION OF ATTO | RNEY FOR DE | EBTOR(S) | |
| co | resuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) empensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of contemplation. | of the petition in bankruptcy | , or agreed to be paid | to me, for services rendered | or to |
| | For legal services, I have agreed to accept | | | 1,500.00 | |
| | Prior to the filing of this statement I have received | | \$ | 1,500.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. T | ne source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. T | ne source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4 . ■ | I have not agreed to share the above-disclosed compens | sation with any other person | unless they are mem | bers and associates of my law | / firm. |
| | I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names | | | | . A |
| 5. Iı | return for the above-disclosed fee, I have agreed to render | er legal service for all aspec | ts of the bankruptcy c | ase, including: | |
| b. c. | Analysis of the debtor's financial situation, and renderin Preparation and filing of any petition, schedules, statem Representation of the debtor at the meeting of creditors [Other provisions as needed] | ent of affairs and plan which | n may be required; | | |
| 6. B | y agreement with the debtor(s), the above-disclosed fee de Any services not listed as basic services in | | g service: | | |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of any analyst proceeding. | greement or arrangement for | r payment to me for re | epresentation of the debtor(s) | in |
| Ap | ril 30, 2016 | /s/ Lawrence D. F | Rouse, Esq. | | |
| Da | | Lawrence D. Rou | ıse, Esq. | | |
| | | Signature of Attorne Lawrence D Rou | | | |
| | | 523 S Eighth St | , | | |
| | | Las Vegas, NV 89 702-387-1800 Fa | | | |
| | | | 14 /11/=30/=43/1 | | |
| | | rouselaw@aol.co | | | |

United States Bankruptcy Court District of Nevada

| In re | Jesus Cibrian Leslie K Cibrian | | Case No. | |
|-------|-----------------------------------|---|--------------------|---------------------|
| | | Debtor(s) | Chapter | 13 |
| | | | | |
| | VEI | RIFICATION OF CREDITOR | MATRIX | |
| | | | | |
| | | | | |
| he ab | ove-named Debtors hereby verify | y that the attached list of creditors is true and c | orrect to the best | of their knowledge. |
| | | | | |
| Date: | April 30, 2016 | /s/ Jesus Cibrian | | |
| | | Jesus Cibrian | | |
| | | Signature of Debtor | | |
| Date: | April 30, 2016 | /s/ Leslie K Cibrian | | |
| | | Leclie K Cibrian | | |

Signature of Debtor

Jesus Cibrian Leslie K Cibrian 5605 Morning Snow Court Las Vegas, NV 89141

Lawrence D. Rouse, Esq. Lawrence D Rouse, LTD. 523 S Eighth St Las Vegas, NV 89101

Aargon Acct No xxxx-xx0037 8668 Spring Mountain Rd Las Vegas, NV 89117

ADT Acct No xxxx6947 PO Box 650485 Dallas, TX 75265-0485

ADT PO Box 650485 Dallas, TX 75265-0485

AFNI Inc Acct No xxxxxxx59-01 PO Box 3517 Bloomington, IL 61702-3517

AFNI Inc Acct No xxxxxxx59-01 PO Box 3517 Bloomington, IL 61702-3517

AFNI Inc PO Box 3517 Bloomington, IL 61702-3517

AHS Group Acct No unk. Restaurant Services 4350 Arville St. Building A #9 Las Vegas, NV 89103

America First Credit U Acct No x4481 1344 West 4675 South Ogden, UT 84409

America First Credit U Acct No x0011 Attn: Bnakruptcy PO Box 9199 Ogden, UT 84409 American Honda Finance Acct No x6885 PO Box 168088 Irving, TX 75016

American Honda Finance Acct No x6385 PO Box 168088 Irving, TX 75016

Americas Servicing Company Acct No x9086 PO Box 10328 Des Moines, IA 50306

Amex Acct No 6593 Correspondence PO Box 981540 El Paso, TX 79998

Bank of America Acct No x5591 NC4-105-03-14 PO Box 26012 Greensboro, NC 27410

Bank of America Acct No x5686 NC4-105-03-14 PO Box 26012 Greensboro, NC 27410

Bank of America Acct No x5880 NC4-105-03-14 PO Box 26012 Greensboro, NC 27410

Barclays Bank Delaware Acct No x6310 PO Box 8801 Wilmington, DE 19899

Beverly Salhanick, Esq. P.C. Acct No E&H Distributing Company, Inc. 2001 S. Jones Blvd. Suite #1 Las Vegas, NV 89146

Beverly Salhanick, Esq. P.C. Acct No Case #: A-15-728302-C 2001 S. Jones Blvd. Suite #1 Las Vegas, NV 89146 BYI Collection Services Acct No xxx3741 PO Box 1313 Malvern, PA 19355-0653

BYL Collection Services, LLC Acct No 8703741 P.O. Box 1313 Malvern, PA 19355-0653

Card Services
Acct No x6310
PO Box 60517
City of Industry, CA 91716-0517

Century Link
Acct No xxxxxxx59-01
3341 W Sahara Ave
Las Vegas, NV 89117

Century Link Acct No 437078676 3341 W Sahara Ave Las Vegas, NV 89117

Chase
Acct No x8522
Attn: Correspondence Dept
PO Box 15298
Wilmington, DE 19850

Chase Acct No x8270 Attn: Correspondence Dept. PO Box 15298 Wilmington, DE 19850

Chase Acct No x7808 Attn: Correspondence Dept. PO Box 15298 Wilmington, DE 19850

Chase
Acct No x9800
Attn: Correspondence Dept.
PO Box 15298
Wilmington, DE 19850

Citibank/Best Buy Acct No x8251 Centralized Bankruptcy CitiCorp Credit PO Box 790040 Saint Louis, MO 63179 Citibank/The Home Depot Acct No x 6264 Citicorp Credit Servicces Centralized BK PO Box 790040 Saint Louis, MO 63179

CNBA Acct No x5823 PO Box 6283 Sioux Falls, SD 57117

Comenity Bank/Ann Taylor Acct No x 7864 PO Box 18125 Columbus, OH 43218

Discover Acct No x1078 Attn: Bankruptcy PO Box 3025 New Albany, OH 43054

E & H Distributing Company, Inc. dba U.S. Foodservice 300 W. Bonana Las Vegas, NV 89106

E & H Distributing Company, Inc. dba U.S. Foodservice c/o Beverly Salhanick, Esq., P.C. 300 W. Bonana Las Vegas, NV 89106

Employment Security Division Acct No xx3768 500 E. Third Street Carson City, NV 89713-0030

First National Bank Acct No x1504 Attn: FNN Legal Dept. 1620 Dodge St. Mailstop Code 3290 Omaha, NE 68191

Ford Motor Credit Acct No x2961 PO Box 62180 Colorado Springs, CO 80962

Gasket Guy Acct No xxxxx xxxoice 3680 W. Reno Ave. Las Vegas, NV 89118 Home Depot Acct No x6264 PO Box 78011 Phoenix, AZ 85062-8011

Jerry Mullen Acct No unknown 584 Convention Court Irwin, PA 15642

Kamran & Co., Inc Acct No xx9129 411 E. Montecito St. Santa Barbara, CA 93101

Las Vegas Pest Control Acct No xx-xxx6436 1850 Whitney Mesa Drive #150 Henderson, NV 89014

Mobile Mini Acct No x7740 4646 E Van Buren Suite 400 Phoenix, AZ 85008

Nevada State Bank 1st Trust deed Acct No x6521 2185 S. 3270 W Salt Lake City, UT 84119

NV Energy Acct No xxxxxx2622 6226 W. Sahara Ave. Las Vegas, NV 89151

NV Energy 6226 W. Sahara Ave. Las Vegas, NV 89151

Olympia Management Services HOA Acct No xxxx5-107 11411 Southern Highlands Parkway Suite 100 Las Vegas, NV 89141

Qualey Law Group Acct No 4235 2320 Paseo Del Prado Bldg. B, Suite 205 Las Vegas, NV 89102 Red Rock Financial Services Acct No R825395 4775 W. Teco Avenue Suite #140 Las Vegas, NV 89118

Southern Highlands Community Assoc. HOA Acct No xxxx xxxxxxx xxxx xourt 11411 Southern Highlands Pkwy #100 NY 12931-7000

Southern Highlands Community Association Acct No x4640 11411 Southern Highlands Pkwy #100 NY 12931-7000

Southwest Gas Acct No x2012 5421 Spring Mountain Road Las Vegas, NV 89150

Southwest Gas Acct No xxx3741

Southwest Gas 5421 Spring Mountain Road Las Vegas, NV 89150

Synchrony Bank/ JC Penneys Acct No x5974 Attn: Bankruptcy PO Box 103104 Roswell, GA 30076

Synchrony Bank/Lowes Acct No x9001 Attn: Bankruptcy PO Box 103104 Roswell, GA 30076

Target
Acct No x5751
C/O Financial and Retail Services
Mailstop BT PO Box 9475
Minneapolis, MN 55440

Total Safety
Acct No xxxx-xx0037
c/o Aargon Collection Agency
8668 Spring Mountain Road
Las Vegas, NV 89117

United Collection Bureau Acct No 54093730 5620 South Wyck Blvd. #206 Toledo, OH 43614

VEDC Acct No xxxx-02-02 5121 Van Nuys Blvd 3rd Floor Sherman Oaks, CA 91403

Wells Fargo Bank NA/Na Acct No x1998 MAC 8235-02F PO Box 10438 Des Moines, IA 50306

Wells Fargo Bank NA/Na 2nd Trust deed Acct No x1998 MAC 8235-02F PO Box 10438 Des Moines, IA 50306

Wells Fargo Bank NA/Na 3rd Trust deed Acct No 2126 MAC 8235-02F PO Box 10438 Des Moines, IA 50306

Wells Fargo Bank NV Na Acct No x4235 1 Home Campus x2303-01A PO BOX 10438 Des Moines, IA 50326

Wilson Elser Acct No xxxx x. xxxxxx xxx Road 300 S. 4th Street 11th Floor Las Vegas, NV 89101

Wilson Elser 300 S. 4th Street 11th Floor Las Vegas, NV 89101